Professional Licensing Agency 402 West Washington Street Room W072 Indianapolis, Indiana 46204



Michael R. Pence Governor of Indiana Nicholas W. Rhoad PLA Executive Director

Behavioral Health and Human Services CE Sponsor Renewal Form

Your Behavioral Health and Human Services CE Sponsor license in the state of Indiana expires on April 1, 2014. To renew, please complete this document in its entirety and submit it with the renewal fee of \$50.00 to the office address shown in the above left corner. Make check or money order payable to 'Indiana Professional Licensing Agency'. If this document is postmarked after April 1, 2014 you must include a \$50 late fee. Have questions? Contact the Board at pla8@pla in gov

piace pianinger.				
LICENSEE INFORMATION	: Update address, if needed,	and provide a current phone nu	ımber and email address	
Enter Licensee Name	Enter License Number	Expiration Date	Renewal Fee	
		4/1/2014	\$50.00	
Street Address				
City	State	Zip Code		
Phone Number	Email Ac	Email Address		
PROGRAM INFORMATION				
List program title(s), program date(s) and number of CE hours granted for each program conducted since last renewal.				
Program Title		Date	CE Hours	
1)				
2)				
3)				
4)				
5)				
6)				
7)				
	LICENSEE AF	FIRMATION		
By signing below, I hereby atte			true, complete and correct.	
Signature of Officer of Corporation			Date (month, day, year)	
Please submit a letter with the cororganization was granted approva • The name of the organization h	al, or since your last renewal	:	occurred since your	

- The name of the contact person within the organization has changed.
- If your organization has been approved to provide continuing education by any other state licensing boards or any national organizations (include date of approval).

Visit us at www.pla.in.gov for more information regarding your license, or email the Board at pla8@pla.in.gov.

"We're striving to cut red tape and remove barriers to practice to make Indiana a state that works! Have ideas? Please give us your suggestions at www.in.gov/cutredtape." -Nicholas W. Rhoad, Executive Director

FOR OFFICE USE ONLY			
Renewal Fee	Receipt No.	Date	